



# Alleghany Youth Golf League

Alleghany County Recreation  
348 S. Main St., P.O. Box 366  
Sparta, NC 28675  
(336) 372-2942 Fax (336) 372-2972

**Cost \$25.00**  
**Due at Time of Registration**

Player Name \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian \_\_\_\_\_ Home \_\_\_\_\_

Phone \_\_\_\_\_

911 Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Medical Conditions/Allergies \_\_\_\_\_

School Attending \_\_\_\_\_ Grade \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Youth Shirt Size: s m l

Adult Shirt Size: s m l xl

Please make checks payable to: **Alleghany County Recreation**

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## WAIVER FOR PARTICIPATION BY PARENT/GUARDIAN

We, the parents of the above named candidate for a position on the Alleghany Youth Golf team, hereby give our approval to participate in any and all related activities. We assume all risks and hazards incidental to such participation including transportation to and from the activities; and we do hereby waive, release, absolve, indemnify, and agree to hold harmless the Alleghany County Recreation, Alleghany County, the Alleghany Youth Golf, the organizers, supervisors, participants, coaches, or their agents for injuries while using county facilities and persons transporting our child to and from activities, for any claim arising out of any injury to our child for any cause.

Name of Family Medical Plan \_\_\_\_\_

Policy I.D.# \_\_\_\_\_

\_\_\_\_\_  
Signature (Parent or Legal Guardian)

\_\_\_\_\_  
Date